

ISSUE CLASSIFICATION

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yes

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Date Paid

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POSITION	ID NO.	DATE
CLASSIFIER	21	5/3/94
EXAMINER	230	5-9-94
TYPIST	319	5-9-94
VERIFIER	20	5-10-94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	12/1/94
2	12/1/94
3	12/1/94
4	12/1/94
5	12/1/94
6	12/1/94
7	12/1/94
8	12/1/94
9	12/1/94
10	12/1/94
11	12/1/94
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48	12/1/94
49	12/1/94
50	12/1/94

Claim	Date
Final	
Original	
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SYMBOLS
✓ Rejected
= Allowed
- (Through numeral) Canceled
+ Restricted
N Non-elected
I Interference
A Appeal
O Objected

(LEFT INSIDE)

BEST AVAILABLE COPY